

Division of Health Care Facilities

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION <i>Doc # 1</i>		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: TN1931	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 - MAIN BUILDING 01 B. WING _____	(X3) DATE SURVEY COMPLETED 01/17/2018
NAME OF PROVIDER OR SUPPLIER WEST MEADE PLACE		STREET ADDRESS, CITY, STATE, ZIP CODE 1000 ST LUKE DRIVE NASHVILLE, TN 37205		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
N 831	<p>1200-8-6-.08 (1) Building Standards</p> <p>(1) A nursing home shall construct, arrange, and maintain the condition of the physical plant and the overall nursing home environment in such a manner that the safety and well-being of the residents are assured.</p> <p>This Rule is not met as evidenced by: Based on observations, the facility failed to maintain the physical plant and overall environment.</p> <p>The findings included:</p> <p>1. Observation on 01/17/2018 at 12:35 AM, revealed a conduit penetration not sealed in the gypsum board wall and a bundle of communication wires penetration above the ceiling in the corridor outside of laundry (gypsum board wall labeled 1 hour). NFPA 101, 8.3.5.1 (2012 Edition)</p> <p>2. Observation on 01/17/2017 at 12:42 PM, revealed a conduit penetration filled with an unapproved foam material above the ceiling in the corridor outside of the dishwashing room (gypsum board wall labeled 1 hour fire). NFPA 101, 8.3.5.1 (2012 Edition)</p> <p>3. Observation on 01/17/2018 at 12:48 PM, revealed 8 conduit penetrations above the ceiling in the corridor outside of the employee lounge (gypsum board wall labeled 1 hour fire). NFPA 101, 8.3.5.1 (2012 Edition)</p> <p>4. Observation on 01/17/2017 at 12:50 PM, revealed 2 conduit penetrations not sealed above</p>	N 831	See Attachment L	

Division of Health Care Facilities

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

6599

JYC221

If continuation sheet 1 of 2

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N 831	<p>Continued From page 1</p> <p>the ceiling in the corridor outside of the Atrium (gypsum board wall labeled 1 hour fire). NFPA 101, 8.3.5.1 (2012 Edition)</p> <p>5. Observation on 01/27/2018 at 12:58 PM, revealed conduit and mc cable penetration not sealed in the smoke barrier above the ceiling at the 2nd floor west cross corridor doors. NFPA 101, 8.5.6.2 (2012 Edition)</p> <p>6. Observation on 01/27/2018 at 12:58 PM, revealed drywall joints not taped and mudded in the smoke barrier above the ceiling at the 2nd floor west cross corridor doors. NFPA 101, 8.5.7 (2012 Edition)</p> <p>Maintenance staff was present when these deficiencies were identified and the administrator acknowledged these deficiencies during the exit conference on 01/17/2018.</p> <p>*****All penetrations in fire barriers are required to be sealed by approved fire-stopping assemblies. Fire-stopping assembly details must be submitted with the plan of correction and be available upon request on reinspection.</p>	N 831		

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Attachment L

N 831

1200-8-6-.08 (1) Building Standards

1. On or before 3/2/18, the maintenance staff will properly correct the following penetrations: 1) A conduit penetration not sealed in the gypsum board wall and a bundle of communication wires above the ceiling in the corridor outside of laundry (gypsum board wall labeled 1 hour, 2) a Conduit penetration filled with unapproved foam material above the ceiling in the corridor outside of the dishwashing, 3) 8 conduit penetrations above the ceiling in the corridor outside of the employee lounge (gypsum board wall labeled 1 hour fire), 4) 2 conduit penetrations not sealed above the ceiling in the corridor outside of the Atrium (gypsum board wall labeled 1 hour fire), 5) conduit and mc cable penetration not sealed in the smoke barrier above the ceiling at the 2nd floor west cross corridor doors, 6) drywall joints not taped and mudded in the smoke barrier above the ceiling at the 2nd floor west cross corridor doors
2. On 1/23/18, the maintenance staff checked for other penetrations, but none were found.
3. Maintenance staff will check quarterly for penetrations and after outside contractors work in the building.
4. At the next QAPI meeting the Maintenance Director will report on the repairs of the penetration.

Completion Date: 3/2/18